ACCEPTED FOR PROCESSING - 2019 May 23 7:23 AM - SCPSC - 2015-197-T - Page 1 of 2015-197-T

Request for Cancellation of Certificate

Mail or Fax a copy of this form to:	Need Assistance with completing the Form?
Public Service Commission of South Carolina Clerk's Office 101 Executive Center Dr., Ste 100 Columbia, S.C. 29210	SC Office of Regulatory Staff Transportation Department
PHONE (803) 896-5100 FAX (803) 896-5199	PHONE: (803) 737-0800
DATE: 5/22/19	
Please consider this a request to cancel my:	
Class C Taxi Certificate	Class A Restricted Certificate
Class C Charter Certificate	
Class C Charter Bus Certificate	
Non-Emergency Certificate	
Class E Household Goods Certificate	
Class E Hazardous Wastes Certificate	
My Certificate Number is #9820	
Move Buddies, LLC . DBA	Tro -
(Name of Company)	(If applicable) CEIVED 07 Deer Crossing Rd
622 Old Trolley Rd, Suite 108	07 Deer Crossing Rd MAY 2 2 2 2000
	Mailing Address if different from Street Address)
Summerville, SC 29485 Elg	Mailing Address if different from Street Address) CLERK'S OFFICE
(City, State, Zip Code)	(City, State, Zip Code)
803-446-0002	
(Telephone Number)	Mil
	(Signature)
CE	0
	(Title) Owner, President, etc.